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**DECLARATION
AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration Submitted with Initial Filing ☐ Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR

Attorney Docket Number J&J5037CIP1

First Named Inventor V. Bhide et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TOPICAL TREATMENT OF SKIN CONDITIONS
(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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Application Serial No.	Filing Date	Status
10/439,735	May 16, 2003	Pending Patented Patented

I hereby appoint:

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☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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City:

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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Alain V.

Family Name
or Surname Khaiat

Inventor's
Signature

Date

17/09/03

Residence: City Singapore

State

Country Singapore

Citizenship France

Mailing Address 3 Meyer Place #09-01

City Singapore

State

ZIP 437991

Country Singapore

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Anna

Family Name
or Surname Gomes

Inventor's
Signature

Date

Residence: City Dulwich Hill

State

Country Australia

Citizenship Australia

Mailing Address 15 Macarthur Parade
NSW

City Dulwich Hill

State

ZIP 2203

Country Australia

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Vaishali

Family Name
or Surname Bhide

Inventor's
Signature

Date

Residence: City Maharashtra

State

Country India

Citizenship India

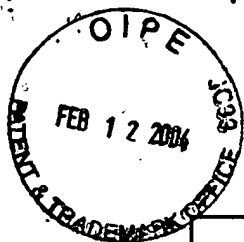
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Dist. Thane

City Maharashtra

State

ZIP 421304

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City:

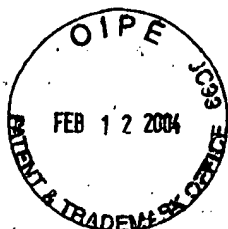
State:

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I hereby appoint:

☒ Practitioners at Customer Number **000027777**

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☐ Practitioner(s) named below:
Name

Registration Number:

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Direct all correspondence to:	<input checked="" type="checkbox"/> or Bar Code Label 000027777	OR <input type="checkbox"/> -Correspondence address below
Name:		
Address:		
Address:		
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Country	Telephone:	Fax:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alain V.		Family Name or Surname Khaiat	
Inventor's Signature		Date	
Residence: City	State	Country Singapore	Citizenship France
Mailing Address 3 Meyer Place 09-01			
City	State	ZIP 437991	Country Singapore

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Anna		Family Name or Surname Gomes	
Inventor's Signature Anna L Gomes.		Date 22 September 2003	
Residence: City Dulwich Hill	State	Country NSW	Citizenship Australia
Mailing Address 15 Macarthur Parade Dulwich Hill, NSW			
City	State	ZIP 2203	Country Australia

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Vaishali		Family Name or Surname Bhide	
Inventor's Signature		Date	
Residence: City Maharashtra	State	Country India	Citizenship India
Mailing Address 4 Purnima Apartments Mhasoba Maidan, Kalyan Dist. Thane, Maharashtra			
City	State	ZIP 421304	Country India

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